

**PROB 12B**  
**(7/93)**

**United States District Court**  
**for**  
**District of New Jersey**  
**Request for Modifying the Conditions or Term of Supervision**  
**with Consent of the Offender**  
***(Probation Form 49, Waiver of Hearing is Attached)***

Name of Offender: **ANGEL GARCIA**

Docket Number: 00-00461-001

Name of Sentencing Judicial Officer: Stephen M. Orlofsky, United States District Judge

Matter reassigned March 14, 2005 to the Honorable JOSEPH E. IRENAS

Date of Original Sentence: December 15, 2000

Original Offense: (Count One) Possession of a Weapon by a Convicted Felon, a Class C Felony, 18 U.S.C. § 922(g)(1)

Original Sentence: Fifty-seven (57) Months Custody of the Bureau of Prisons, Three (3) Years Supervised Release, \$100.00 Special Assessment (Paid). Special Conditions: (1) Drug Testing/Drug Abuse Treatment (Outpatient and/or Inpatient), if directed by U.S. Probation Office and (2) Full Financial Disclosure.

Type of Supervision: Supervised Release

Date Supervision Commenced: February 3, 2005

**PETITIONING THE COURT**

- ☐ To extend the term of supervision for \_\_\_\_\_ Years, for a total term of \_\_\_\_\_ Years.  
☒ To modify the conditions of supervision as follows. The addition of the following special condition(s):

The defendant is to be confined to his residence for a period of 6 months commencing at the direction of the U.S. Probation Office. The defendant shall be required to be at this residence at all times except for approved absences for gainful employment, community service, religious services, medical care, educational or training programs and at other such times as may be specifically authorized by the U.S. Probation Office. The defendant shall wear an electronic monitoring device and follow electronic monitoring procedures. The defendant shall permit the probation officer access to the residence at all times and maintain a telephone at the residence without any custom services or portable, cordless equipment. The defendant shall comply with any other specific conditions of home confinement as the probation officer requires. The defendant shall pay the costs of electronic monitoring, specifically \$3.26 per day.

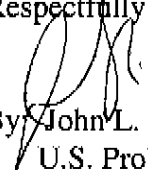
The defendant shall participate in a mental health program for evaluation and/or treatment as directed by the U.S. Probation Office. The defendant shall remain in treatment until satisfactorily discharged and with the approval of the U.S. Probation Office.

### CAUSE


On December 7, 2005 and January 3, 2006, the offender admitted that he used cocaine. On December 27, 2005, the offender tested positive for cocaine. This officer discussed treatment with the offender and he is aware that Senior Probation Officer/Drug Treatment Specialist will be performing another substance abuse evaluation and he must comply with any recommendations of the evaluation. The offender has also requested mental health treatment at this time.

The offender has signed a Waiver to Modify Conditions of Supervised Release (Probation Form 49), consenting to the imposition of the conditions of six (6) months home confinement with electronic monitoring and mental health evaluation and/or treatment.

Respectfully submitted,

  
By John L. Paccione  
U.S. Probation Officer  
Date: 1/4/06

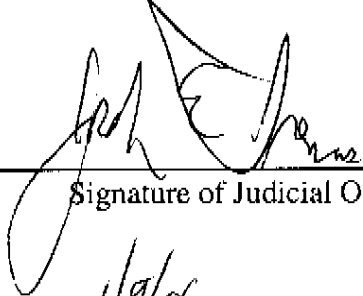
APPROVED:

  
RICHARD A. GALLO Date  
Supervising U.S. Probation Officer

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THE COURT ORDERS:

- ☒ The Modification of Conditions as Noted Above  
☐ The Extension of Supervision as Noted Above  
☐ No Action  
☐ Other

  
\_\_\_\_\_  
Signature of Judicial Officer

  
\_\_\_\_\_  
Date

PROB 49  
(3/89)

**UNITED STATES DISTRICT COURT  
FOR THE  
DISTRICT OF NEW JERSEY**

**Waiver of Hearing to Modify Conditions  
of Probation/Supervised Release or Extend Term of Supervision**

I have been advised and understand that I am entitled by law to a hearing and assistance of counsel before any unfavorable change may be made in my Conditions of Probation and Supervised Release or my period of supervision being extended. By 'assistance of counsel,' I understand that I have the right to be represented at the hearing by counsel of my own choosing if I am able to retain counsel. I also understand that I have the right to request the court to appoint counsel to represent me at such a hearing at no cost to myself if I am not able to retain counsel of my own choosing.

I hereby voluntarily waive my statutory right to a hearing and to assistance of counsel. I also agree to the following modification of my Conditions of Probation and Supervised Release or to the proposed extension of my term of supervision:

To extend the term of supervision for years, for a total term of years.

To modify the conditions of supervision as follows. The addition of the following special condition(s):

The defendant is to be confined to his residence for a period of 6 months commencing at the direction of the U.S. Probation Office. The defendant shall be required to be at this residence at all times except for approved absences for gainful employment, community service, religious services, medical care, educational or training programs and at other such times as may be specifically authorized by the U.S. Probation Office. The defendant shall wear an electronic monitoring device and follow electronic monitoring procedures. The defendant shall permit the probation officer access to the residence at all times and maintain a telephone at the residence without any custom services or portable, cordless equipment. The defendant shall comply with any other specific conditions of home confinement as the probation officer requires. The defendant shall pay the costs of electronic monitoring, specifically \$3.26 per day.

The defendant shall participate in a mental health program for evaluation and/or treatment as directed by the U.S. Probation Office. The defendant shall remain in treatment until satisfactorily discharged and with the approval of the U.S. Probation Office.

Witness: \_\_\_\_\_

U.S. Probation Officer

Signed: \_\_\_\_\_

Probationer or Supervised Releasee

1/4/06.  
\_\_\_\_\_  
DATE